Indiana State Department of Health (ISDH) Preventive Health & Health Services Block Grant (PHHSBG) Meeting Minutes

Time: Wednesday, April 6, 2016, 10:30 am – 11:30 am

Location: Yoho Board Room, 3rd floor, ISDH

Called by: Katie Hokanson, Primary Investigator (PI), PHHSBG

I. Attendees: Katie Hokanson – *State Health Commissioner Designee* (ISDH), Ann Alley (ISDH), Carolyn Snider (Indiana Assn. of School Nurses, via phone), Danielle Patterson (American Heart Assn, via phone), Eden Bezy ISDH), Gretchen Martin (SDH), Kelly Cunningham (ISDH), Helen Schwartzel (ISDH), Jay Brainard (Wabash Fire

Dept, via phone), Linda Stemnock (SDH), Mohan Ambaty (SDH), Jim Powers (ISDH, via phone), Sharon Langlotz(Indiana Criminal Justice Institute), Sarah Seward (ISDH)

II. Agenda Topics

- 1. Program Updates (October 1, 2015 through April 1, 2016
 - a. Division of Chronic Disease, Primary Care and Rural Health (CDPCRH) Ann Alley— Coalitions are in varying stages of updating their Strategic Plans for Chronic Disease Health Plan. Healthy Weight Initiatives are starting regional meetings bringing information to the communities. Cardiovascular & Diabetes Coalition of Indiana (CADI) is also starting to host regional meetings. Parkview's Community Paramedicine project has hired staff and have started providing services in home trying to prevent repeat hospital visits. An intern has hired to start reporting and tracking activity. Question: Does Medicaid pay any of the costs? Answer from Ann: Parkview Hospital will bill for services as their system permits. Research will be conducted to get a better understanding of the viability of pursuing Medicaid reimbursement.
 - b. Epidemiology Resource Center (ERC) / Data Analysis Team (DAT) –Linda Stemnock—Matt Kaag, contractor with the DAT, continues to download and edit birth and death certificate data. The timeframe has been significantly reduced from 28-33 months to 12-13 months for releasing data. 2014 data has been released. The Behavioral Risk Factor Surveillance Survey (BRFSS) is going to be able to place an additional 628 calls this year when the survey is conducted. Leadership at all Levels is starting back up this spring. We currently have 54 individuals registered for the classes; 44 ISDH employees and 10 employees from other state agencies.
 - c. Trauma and Injury Prevention Katie Hokanson—the division analyzed the injury data and

identified two topic areas to focus on at this time: older adult falls resulting in injury and Child Passenger Safety (CPS). The division has met with the Indiana Criminal Justice Institute (ICJI) and Automotive Safety Program (ASP) to identify the gaps in Indiana regarding child passenger safety. There are opportunities to increase the number of CPS technicians and the number of car seat clinic events throughout the state. The second Annual Injury Prevention Conference is scheduled for mid-May and will focus on poisonings; the afternoon sessions will be divided into two tracks—pediatric and adult injury prevention. Received funding for the Prescription Drug Overdose: Prevention For States grant March 1 and have applied for the Core State Violence and Injury Prevention Program grant.

- d. Child Fatality Review (CFR) program Gretchen Martin—continuing to work on Direct On-Scene Education (DOSE) training event which will be presented at the Indiana Emergency Response Conference (IERC) in August. There are now Safe sleep contacts in 90 out of 92 counties. This activity is available for providing cribs, safe sleeping information, etc.
- e. TB/Refugee Midia Fulano—Not at the meeting, so no report.
- f. Food Protection Mohan Ambaty—CodePal has been around since 2011 and work continues to bring local health departments (LHDs) on board for reporting safe food information. As of right now things are at a standstill because the division is looking for a new software vendor. An RFP will be issued within the next two weeks.
- g. Office of Public Health & Performance Management (OPHPM) –Sarah Seward—OPHPM is currently in a restructuring mode. Currently working with Indiana INdicators to update dashboards and information that is used by LHDs and communities when conducting community health assessments. IN-TRAIN had a server update so a new, more user-friendly platform will be available for providing online courses. Currently the system has very good participation for the courses that are currently available. Continuing to work with LHDs that are working towards accreditation. Working closely with Purdue University to provide Lean Six Sigma courses in-house. The courses will be public health focused.
- h. Sexual Assault Services (ICJI) Sharon Langlotz—Continuing to provide education to victims of sexual abuse and sexual assault. Working to reach victims before the assault happens.
- i. Environmental Public Health Division Jim Powers—Fluoridation program continues to work with communities. The fluoridation program has been around for 71 years and in Indiana for 65 years. Participation is at 95% of public water systems with national participation at 76%. Water fluoridation is still the most cost-effective way to reduce dental decay. There is a continuing problem with communities that are considering dropping water

fluoridation due to budget issues and anti-fluoridation activity. Staff continues to make contacts and provides information and education about the fluoridation program. Ann Alley suggested the division work with CDPCRH to add fluoridation to the agenda for community contact subjects.

2. Modifications to FY 15 Work Plan/Redirection of Funds

- a. Office of Public Health Performance Management—Sarah Seward—Contract with the Indiana Business Research Center for Indiana INdicators website is under budget. Shifting remaining funds that were set aside for the contract (with CDC approval) to CDPCRH to bring on a contractor FTE to address childhood obesity in the Division of Nutrition and Physical Activity. Eden Bezy gave a short synopsis of the need for a coordinator for childhood obesity. There needs to be a contact person to address guidelines that should be put into place for children and adolescents on physical activity. This is the first step in primary prevention. Funded Amount: \$13,500, APPROVED BY ADVISORY BOARD
- 3. Discussion of ideas for 2016 Linda Stemnock—could use a person to clean up the fetal death reporting data. Ann Alley—chronic coalitions support for media messaging, technical support and uniform messaging which led to a discussion about media messaging in general for the agency (Eden, Ann, Sarah, Gretchen, etc.). Suggested developing a branding strategy which would make the messages consistent in format etc. Establish connectivity of all ISDH programs what are the "common threads"? Sarah Seward suggested aligning the metrics with the strategy plan to develop an electronic performance management data system.
- 4. Other Discussion—2016 Plans/Questions/Comments— Discussion of e-mail from CDC regarding Annual Report for FY15—Received positive remarks from CDC about the annual report. Question was asked about the upcoming timeline of events for FY16 Work Plan: Propose funding ideas to Executive Staff, send out funding amounts to program areas and request work plans, schedule an Advisory Committee to review the work plan, schedule a public hearing and submit the work plan by July 1.

V. Next Meeting: Late May / Early June.